

COSMETOLOGY SECTION
PO BOX 9026
OLYMPIA, WA 98507-9026
dol.wa.gov

Cosmetology, Barbering, Esthetics, and/or Manicuring School Tuition Certification

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School Information				
SCHOOL NAME		E-MAIL ADDRESS	E-MAIL ADDRESS	
ADDRESS (Physical Location)		I		
CITY		STATE	ZIP	
Approved Security Information				
GROSS TUITION (Jan.1-Dec. 31 of last year)	AMOUNT OF APPI	AMOUNT OF APPROVED SECURITY REQUIRED \$		
Note: Your school may be required to compliance with the security provision	-		evidence of your	
Certification				
By my signature, I certify that the above school annual gross tuition collection from January 1 than \$50,000.00.				
I understand that a material misstatement of in action against the school license pursuant to I information is accurate and complete.		. , ,		

Upon Filing, This Application Becomes a Public Record and is Subject to Public Disclosure Provisions Under RCW 42.56

City

State

Date

Signature of Owner